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I.

MR. HALSTEAD'S CELEBRATED MODE  
OF TREATING DYSPESIA.

WE have in an ordinary case of dyspepsia the following condition of things, viz :—

1st. A relaxed, enfeebled state of the muscular coat of the stomach, amounting in some cases to a partial paralysis, whereby it is rendered unable to perform its proper function of contracting upon the food, and gently passing it around, so that every portion of it may be in turn applied to the inner surface of the stomach, and exposed to the full action of the gastric juice. This fluid, in the general torpor of the organ, is also probably secreted in a less quantity, and perhaps of a vitiated quality.

2d. A preternatural rigidity, and permanent contraction of the abdominal muscles; which, instead of presenting the uniform, soft, relaxed, and yielding state, natural to them in a healthy condition, are often drawn up, as it were, into knots, and to the touch seem like cords stretched tight beneath the skin.

3d. A torpor or obstruction of the peristaltic motion of the bowels, evinced by obstinate costiveness, produced, as is supposed, in a great measure, by the constant and undue pressure of the external muscles; or by a spasmodic action

of the intestines themselves, corresponding with that of these muscles.

4th. A constriction of the thorax, and consequently impeded respiration, caused by the excessive and constant action of the abdominal muscles, in pulling down the ribs.

These may be considered as the immediate and mechanical effects which are generally consequent upon disordered action of the stomach. The remote effects of this disease,—such as derangement of the functions of the liver, affections of the lungs, the heart, the kidneys, the head, and the nervous system; in short, disorders of almost every part of the body,—are so numerous, and make their appearance so irregularly, that it is impossible to enumerate them in any precise order of succession.

Of the four conditions of parts above enumerated, it will be seen that the two last are effects of the second, viz., the unnatural contraction of the abdominal muscles.

The indications of cure, therefore, resolve themselves into the following, viz :—

1. To restore these muscles to their natural relaxed state.

2. To excite the stomach to resume and continue its proper action.

The means of fulfilling these indications may, at the first glance, appear opposed to each other ; but

when it is remembered that the rigidity of the external muscles is the consequence of the debility or relaxation of the proper muscles of the stomach, the effect of remedies calculated to restore these parts to their natural condition will not seem so contradictory.

*Method of Relaxing the Abdominal Muscles.*

These muscles belong to that class denominated *voluntary*, which in a state of health are under the control of the will. Thus the individual can, by a voluntary effort, contract or relax them, in the same manner with the muscles of the arm or leg; and, like these muscles, their natural state, when not called into action, is one of complete relaxation. In the condition, however, we have just been describing, these muscles remain permanently contracted, and, for the most part, can no more be relaxed by an effort of the will, than those of the leg in a fit of cramp. Still, however, though a perfect relaxation can very rarely be effected by the act of volition, yet now and then we meet with cases where much may be done in this way.\*

It is therefore proper to keep the attention of the patient directed to this point; and by telling him "to let down these muscles," an expression, though not perhaps strictly technical, he will perfectly understand.

\* An instance, somewhat analogous to this, of the power of the will over muscles in a state of spasmodic contraction, offers itself in the case of a dislocated shoulder. Here the main difficulty, in the way of reducing the dislocation, is the spasmodic contraction of the muscles; and the patient, by exercising a strong control over them, and letting them go from him, as it were, greatly favors the return of the bone to its socket.

Again it may be observed, that, in a healthy state, the greatest relaxation of these muscles takes place at the moment of inspiration, or drawing in the breath, as may be seen by the gentle elevation of the abdomen at this time. The patient should therefore endeavor to favor, as far as he is able, this fulness or swelling of the abdomen in the act of breathing, by letting the breath descend as low in the body as possible; taking care that he does not increase the muscular rigidity, instead of removing it, by straining, or making violent efforts to brace himself out. A full, but natural inspiration, should be aimed at.

The method, however, which has proved most efficacious in producing the desired effect of relaxing these muscles, is the external application of warm fomentations, such as emollient cataplasms, steaming, &c.; or, in other words, exposing them to the combined action of heat and moisture. Various modes of using these applications have been tried. Covering the abdomen with a common bread and milk poultice, applied warm, and repeated two or three times a day, will frequently be found very serviceable, particularly when there is much soreness and tenderness to the touch. A hot brick wrapped in a flannel cloth steeped in vinegar, and covered with a dry towel, may also be applied with advantage.

The method, however, found by experience to be the most convenient, as well as the most effectual, is the following:—

Let the patient, when he goes to bed, cover the whole abdomen, from the margin of the chest to the hips, with flannel cloths wrung out in a mixture of equal parts of

hot vinegar and water. These flannels should be applied in three or four thicknesses, so as to retain a greater quantity of moisture. Then spreading over them a coarse dry towel; a bottle filled with boiling water, or, what is better, a common flat-iron, such as is used in smoothing linen, heated as warm as can well be borne, should be gently passed over the whole abdomen, continuing the process for fifteen or twenty minutes, and applying the iron more particularly to those parts where there appears to be the greatest degree of rigidity. When the bottle of water or iron begins to grow cold, the cloths should be removed, and a piece of dry warm flannel substituted, to prevent any risk of taking cold from the operation.

By repeating this process two or three times a day, taking care that it be always done upon an empty stomach, a sensible change in the condition of the abdomen will soon be observed. From the tense and rigid state it previously exhibited, it will gradually become soft and yielding; the muscles will regain their natural flexibility; the feeling of tightness around the body will be removed; the patient will be able to expand the chest more fully in the act of respiration, and being relieved from the sense of constriction and tendency to bend forward, occasioned by the contraction of these muscles, he will experience altogether a degree of ease and comfort, to which he had long been a stranger.

Though great relief will commonly be afforded in the course of a few days by this process, yet sometimes, especially where the muscles have been for a number of years in this state of unnatural rigidity, a longer perseverance in

the use of the applications will be necessary to produce the desired effect. Weeks, and even months, in some instances, have elapsed before the requisite change in the condition of the muscles could be effected.

Now and then, also, a degree of exhaustion and debility will ensue upon the use of the warm application. This may either be the consequence of a sudden removal of the support to which the contents of the abdomen had been so long accustomed from the pressure of the exterior muscles; or it may be owing to a too long continuance of the warmth, producing a relaxed state of the stomach itself. In these cases, it will be proper to discontinue the fomentations for a day or two; and on resuming them, not to continue their application for so long a period at each time.

Occasionally, at such times, and from the same causes, the patient may experience an increased degree of flatulence; this, however, generally proves but a temporary inconvenience. As the stomach begins to recover its tone, by the plan of stimulating it presently to be described, these symptoms of debility will rapidly disappear, and be succeeded by an increase of strength and vigor throughout the system generally.

#### *Method of Stimulating the Stomach.*

Having thus described the manner by which the first indication of relaxing the abdominal muscles may be fulfilled, we will proceed to show the method by which the next object in the plan of cure is to be effected, viz., of restoring the tone of the stomach; or, in other words, of stimulating it to resume its original and healthy course of operations. This is done

by communicating a mechanical action to the organ, resembling as nearly as possible that produced by natural exercise; the art of doing which constitutes the most important part of the plan of treatment now proposed.

It may simply be observed, without entering into any disquisition respecting the peculiar *modus operandi*, that the muscles throughout the system are stimulated to action by the influence of the nerves. In other words, by means of a certain something, the precise nature of which is not perfectly understood, but which, from its effects, is supposed to resemble the Galvanic fluid, or to be identical with it, communicated from the brain or sensorium, through the medium of the nerves, the muscular fibre is excited to contract; and by the contractions thus produced, all the various motions of the body are performed.

The stomach, we have seen, is principally supplied by a pair of nerves proceeding directly from the brain, by means of which nerves it is excited to perform its proper functions. It also appears that besides the nervous influence, a certain degree of mechanical stimulus, communicated, as we have seen, by external motion or agitation, is requisite, in order that these functions should be performed with due vigor. Hence the absolute necessity of exercise, the importance of which is universally acknowledged, although its peculiar manner of exciting the stomach to action does not appear to be so generally understood. The mode in which this takes place, by a succession of slight shocks or impulses upon the organ, we

have already attempted to explain.

There are two causes which seem to prevent the prompt effect of exercise upon the stomach. One of these, viz., the condition of the abdominal muscles, we have already dwelt upon somewhat at large. The other is a torpor or absence of the natural sensibility in the organ itself; the result, apparently, of long inaction from a deficiency of the natural stimulus. The degree of this torpor may in general be ascertained by making a slight pressure with the finger, upon the spot just below the breast-bone, commonly called the pit of the stomach. This spot, in a healthy person, it is well known, possesses a remarkable degree of sensibility; a slight blow upon it producing a painful sensation of a peculiar indescribable character, somewhat like that experienced when the finger is pressed upon the eyeball. This sensation is the effect of the impression made upon the nerves of the stomach, which are expanded upon it immediately under this spot. These same nerves, as it has been remarked, also supply the lungs, and are the principal ones of a set of nerves called the respiratory system, which go to the different parts either immediately or remotely concerned in the function of respiration. By this fact in physiology, the sudden check given to the breathing by a stroke upon this spot, may be accounted for: and when death takes place, as it sometimes does, in consequence of a violent blow here, it is probably the result of the shock given to this system of nerves.

This spot is sometimes morbid-

ly sensitive, and the slightest touch will give exquisite pain. This is the case when the mucous membrane, or inner coat of the stomach, is in a state of inflammation, which we have observed is often confounded with the disease in question. Most commonly in dyspepsia, there is a torpor or want of sensibility at this spot; so great, in some instances, that no more sensation will be produced by pressure here, than upon any other part of the abdomen.

Generally, however, the latent sensibility of the stomach may be excited by the following process:—A gentle tap or slight push is given with the finger upon this spot, and repeated until the effect is produced, using more or less force, according to the feeling of pain experienced. A degree of caution must, of course, be observed in doing this, as we have seen that fatal consequences have now and then resulted from a violent blow upon this part. By commencing gently, however, and making repeated trials, the natural quickness and delicacy of sensation in this part will be restored.

The effect of the impulse given to the stomach in this manner, seems to be to rouse it from its state of apathy, and to render it more sensitive to the stimulus of natural exercise; the mode of applying which in an artificial manner will presently be described. Often, on giving the slight stroke upon the pit of the stomach in this manner, a sensation of pain will be felt running up in the course of the nerves, as high as the throat; and sometimes even between the shoulders. When this is the case, it seems to indicate a degree of ex-

citability in the stomach, favorable to its recovery. At any rate, when the spot retains a portion of its natural consciousness of external pressure, and when the sensation already mentioned is felt running up towards the throat, the amendment of the patient is usually most rapid: while, on the other hand, when little or no impression can be made upon this spot, it shows an extreme degree of torpor in the organ, and is consequently an unfavorable symptom.\*

It may be remarked, that very often the impression cannot be made upon the stomach in this way, on account of the resistance opposed by the rigidity of the external muscles, which often start into violent involuntary contraction, the moment the finger is applied to them. By repeated trials, however, and by watching an opportunity when the muscles are most relaxed—which will generally be found to be the case after using the warm fomentations—the stomach may be awakened in this manner from its state of torpor.

This being effected, the next point is to give the mechanical stimulus, of which we have spoken, to the stomach. To this end, the patient should be placed in the position that will favor most the relaxation of the abdominal muscles. A sitting posture will be the best for this purpose.

\* When the sensibility is restored at the pit of the stomach, the patient should be careful to keep it so; which can be done by frequently touching the spot with the finger or thumb, with sufficient force; because if he allows this spot to become torpid, he will be liable to a return of the disease, or rather to a delay of the cure. The more sensitive the part becomes, the more rapid the cure.

Then the practitioner, seated on the right of the patient, and facing him, having excited the sensibility of the stomach by the process just described, places his right hand upon the lower part of the abdomen, in such a manner as to effect a lodgement, as it were, under the bowels, suffering them to rest directly upon the edge of the extended palm, from the tip of the thumb to that of the fore finger. When the muscles have been properly relaxed, there will be no difficulty in doing this. Then, by a quick but not violent movement of the hand in an upward direction, by which the bowels are thrown up much in the same manner as in riding on horseback, a sort of pulsatory action will be communicated to the stomach, and a sensation experienced similar to that produced by a slight blow upon the region of the organ.

By continuing this action from one to two minutes, a sense of warmth, and a feeling somewhat like that experienced from a slight electric shock, will be felt at the stomach, and a general excitement or gentle glow throughout the system. The pulse will most usually be increased both in strength and frequency; the extremities, when cold, will have a little return of warmth; and not unfrequently there will be a gentle perspiration all over the body. The patient will often experience a feeling as of returning vitality and vigor, to the previously inanimate and enfeebled stomach. When flatulence has been a prominent symptom, large quantities of wind will be thrown up, to the patient's great relief; and indicating an internal and natural contraction of the organ

upon its contents. All the feelings, indeed, will be those of returning action, not only in the stomach, but throughout the system generally.

At first, perhaps, the sensation produced in this manner upon the stomach, may be somewhat painful, but almost invariably after a few repetitions the effect upon the organ itself, and upon the system, becomes agreeable. It now and then, though rarely, happens that from some peculiar delicacy or irritability of the stomach, a slight nausea and feeling of faintness ensue upon the process described. These sensations, however, seldom occur after the first trial; the stomach, however irritable, soon getting accustomed to stimulus, which, from the pleasant effects it produces, seems to be perfectly consonant with its nature.

By understanding the principle of the remedy in question, and the precise object to be effected, viz., to communicate a series of slight impulses or concussions to the stomach from below upwards, so as to resemble as much as possible the effect of exercise of a jolting nature, the manner of accomplishing it may be varied, and the patient be placed in different positions, so as to suit his own or the practitioner's convenience.

A very good method of giving the mechanical stimulus to the stomach is the following:—Let the patient be seated as before, bending himself a little forwards; the practitioner standing behind him, and putting his arms under those of the patient, places both hands, with the points of the fingers opposite to each other, upon the lower part of the abdomen,

indenting its surface, and holding the hands horizontally, with the palms upwards, so as to get them as much possible in a line immediately under the stomach. Then by giving a quick but gentle movement of the hands upwards, the action will be communicated to the stomach, and the peculiar sensation already described will be distinctly perceived, and the desired effect upon this organ and the system at large be produced.

It must be kept in mind, that a certain degree of relaxation of the abdominal muscles must take place, before any benefit can be expected from this exercise. Indeed, where this is not the case, the peculiar sensation at the stomach, which is the test of the proper action being communicated to it, will not be experienced; the hands, instead of getting under the stomach, will slide over the tense surface of the abdomen; and if the attempt to give the action is persevered in under these circumstances, a soreness and increased rigidity of the muscles will probably be the result.

Another convenient method is to let the patient lean with the back against a wall, inclining the body a little forwards, so as to favor the relaxation of the abdominal muscles. The assistant, seated before him, communicates the impulse to the stomach, by making a quick movement upwards with the palms of the hands placed firmly upon the abdomen.

Sometimes this action will not be so readily communicated to the stomach from the lower part of the abdomen. When this is the case, by giving the motion upwards with the points of the fingers, placed a little below the tender spot at the pit of the sto-

mach, being careful in this as in the other methods to get as much under the organ as possible, the peculiar sensation at the stomach which we have so often mentioned will generally be felt, provided any sensibility remains. Then gradually moving the hands lower and lower down, the impression may be at length communicated from the inferior part of the abdomen. The advantage of giving this action to the stomach from as low a point as possible, seems to be two-fold. In the first place, by so doing we get more immediately under the organ, and consequently are enabled to apply the stimulus to a greater portion of its surface, and in the direction apparently most natural to it: and secondly, the intestines seem also to be invigorated, and their peristaltic motion increased by the gentle agitation they receive.

This process, it may be observed, is not that of kneading the stomach and bowels, neither is it external friction; the object being to communicate a series of gentle shocks or impulses to the stomach, somewhat like the pulsatory motion felt by placing the hand upon one side of a bladder filled with water, and gently tapping with the finger on the opposite side; or like that familiar to the touch of the medical practitioner, when he strikes upon the abdomen of a dropsical patient in order to detect the presence of the fluid within. I say *somewhat* analogous to these, since, as the contents of the abdomen are not fluid, of course the impression cannot be precisely the same.

Other methods, besides those already detailed, of giving this mechanical stimulus to the stomach, will be suggested by the



ingenuity of the practitioner. It must, however, always be borne in mind, that force or violence of any kind is never to be employed: on the contrary, the object is to be accomplished by a certain degree of tact and address, only acquired by practice, and by understanding perfectly the principles on which the plan of treatment is founded. Out of many hundred cases treated in this manner, there has not been an instance where any injurious effects have ensued.

Like tonic medicines administered internally, which require to be taken repeatedly in moderate doses, and at regular intervals, in order to ensure their full success; the efficiency of this plan of mechanically stimulating the stomach depends upon its being frequently and regularly performed,—so as not to permit the organ to relapse into its former torpid, sluggish condition. Like other tonics, also, when properly administered, after the stomach has recovered its natural tone and power of action, the process may be gradually discontinued; common exercise, provided the muscles continue in their relaxed state, producing its natural, healthful and sufficient effect upon the stomach. As it is therefore essential that this process of stimulating the stomach should, at first, be frequently repeated, in order to ensure its good effects, it becomes necessary that “the patient should minister to himself.” For this purpose, he must be instructed in the manner of giving the mechanical stimulus to his own stomach.

This is to be done as follows:—The patient first places himself in the position which seems most

to favor the relaxation of the abdominal muscles, that is, he may either be seated or standing, with the body a little inclined forwards, in the manner already described. Then let him place his hands in a horizontal position upon the fore part of the abdomen, so that the points of the fingers may meet each other about an inch or two below the sensitive spot at the pit of the stomach. Then turning the palms of the hands uppermost, at the same time gently inclining the body forwards, so as to get them as nearly as possible immediately beneath the stomach; by a slight movement upwards, the pulsatory action will be communicated to it, and the peculiar sensation felt at the part, as before described.

Some difficulty will probably be experienced in communicating the impulse to the stomach, by reason of the involuntary action of the external muscles. By an effort of the will, however, and a little perseverance, this will soon be overcome; and although the performance of this action may at first prove awkward and fatiguing to the patient, yet after a little practice, and some experience of its beneficial effects, it will become easy and simple. Besides relaxing the muscles in as great a degree as he is able, the patient should also breathe as fully and naturally as possible, in order that the stomach may not be drawn inwards, so as to prevent the hands from getting beneath it in order to communicate the movement.

The same effects, such as the glow and feeling of warmth at the stomach, and gentle excitement of the system generally, will attend this action when properly



performed by the patient himself, as when done by an assistant.

It must also be observed, that, in both cases, the hands which at first are placed near the stomach, should gradually be applied further and further down, until the desired sensation can be communicated to the stomach from the lowest part of the abdomen. The object and advantage of this has been already mentioned.

The frequency with which the process should be repeated, must be determined by the state of the stomach; its greater or less degree of debility, and the effect produced upon it by the stimulus. In common cases, where there appears to be a considerable degree of torpor and want of action in the organ, the directions usually given to patients, are to make the application as frequently as every half hour through the day; continuing it for a minute or two each time, or until the peculiar glow and feeling of warmth is produced. It is improper, however, to stimulate the stomach in this manner immediately after eating; and it is therefore best, in general, to wait about an hour after each meal, before entering upon this process. Gradually, as the organ recovers its tone, the intervals between the several applications of the remedy may be lengthened, until two or three times during the twenty-four hours will suffice. After a while, the practice may be wholly discontinued,—regular exercise, such as we have described, and for which this process is a substitute (provided the muscles continue in their natural relaxed state), furnishing a sufficient stimulus to the stomach.

The immediate effects of this

external action upon the stomach, as we have observed, are the same with those of a gentle tonic or stimulant taken internally. In many instances, a surprising increase of muscular strength has been experienced by the patient. A young man, who had been so much reduced by the disease as to be confined for the greater part of the time to his bed, and who could scarcely stand without support, invariably, after having his stomach stimulated in this manner for a few minutes, found himself so much stronger as to be able to walk about the room for some time without assistance. He was eventually, by persevering in the remedy, entirely restored to health, and, when last heard from, was a hale and vigorous man.

The effects upon the system which follow the continued use of this remedy, and which will ensue after a longer or shorter period, depending upon the state of torpor to which the stomach has been reduced, and the perseverance with which the plan of cure is followed up, are those indicative of an increase of tone in the organ, and an improved state of the digestive functions generally.

The stomach becomes able to retain and digest food which before oppressed it. The uneasy sensations consequent upon eating, are gradually diminished, and at length entirely removed. The food being more perfectly digested, an augmentation of strength, and an increase of the flesh of the patient, takes place. The morbid appetite becomes natural and regular. The secretions generally are restored; that of the liver in particular; and the bow-

els, their natural stimulus of healthy bile being afforded them, and the constriction of the external muscles removed, gradually resume and continue their regular action, without the aid of medicine.

In a number of instances, in which patients have been in the daily habit of taking purgatives for years, by a perseverance in the plan of treatment just detailed, they have been enabled entirely to discontinue the use of medicines of every description.

All the sensations and feelings of the patient, from being of the most disagreeable nature, become pleasurable. His sleep is natural, and undisturbed by hideous dreams. He finds that he can eat and drink with comfort, and without the dismal foreboding that, for every mouthful he swallows, a dreadful penalty of suffering is to follow. His head by degrees becomes clear of the *megrims* and vapors with which it was filled, and is free from the feeling of confusion and other distressing sensations of which it was the seat. The faculties of the mind grow stronger, and become more under the control of the patient's will; and he can now read, write, and attend to his business with ordinary alacrity. The sluggish fiend that had so long oppressed him with its leaden wings has taken flight, and he feels as if a load like a mountain had been removed from his system—as if an intolerable weight of chains had fallen from every limb. In short, he is a new being, and cannot sufficiently express his delight at the change.

But although these effects sometimes take place, particularly in recent cases of the dis-

ease, in an incredibly short time, the enemy is not always dislodged so easily. Much constancy and perseverance must be exercised by the patient, in order to ensure success, and many drawbacks will be met with, before a perfect and permanent cure can be effected. One of the most common of these arises from the inclination, often irresistible on the part of the patient, to indulge the appetite, as soon as he finds that he can eat with impunity, and to overload the stomach, especially with those articles of which he has been long deprived. Neglecting the use of the remedy as soon as a degree of improvement is experienced, and before the stomach has fully recovered its tone, or giving it up in despair when no visible change in the symptoms immediately follow its use, are common causes of its failure. Exposure to the causes which originally induced the disease, will also necessarily prevent any good effects from this method.

It may be mentioned, however, for the encouragement of those who, from the little benefit they seem to be receiving, are tempted to abandon the plan of cure, that several instances have occurred, in which the patients became disheartened by reason of the slow progress they were making, and discontinued the use of the remedy as of no avail; and who yet eventually, on being induced to recommence and persevere in it, became perfectly cured.

## II.

### TREATMENT OF PUERPERAL MANIA.

DR. BLAKE, of Ipswich, has expressed, in a communication to the London Medical and Surgical,

some new ideas respecting this distressing malady. He considers true puerperal mania as nearly allied in its nature to delirium tremens, although it does not arise from precisely the same causes, nor assume precisely the same appearances.

It is a well known fact, says he, that during the greater part of the period of utero-gestation, the vascular system is in a highly plethoric state, and the blood itself exhibits, when drawn, properties similar to those which exist in it during the height of inflammation.\* Now it must seem evident that such a condition, existing for so many months in the animal economy, cannot fail to act, through the medium of the bloodvessels, as a strong and continued stimulus to the brain and nerves;—it therefore ought not, in my mind, to appear surprising, that in peculiar states of the female constitution, mental alienation, or puerperal mania, should be the consequence of the sudden privation of such powerful and long accustomed stimulation, which is the natural result of parturition and its consequences. The brain and nervous system in this case suffer, subsequent to delivery, from the loss they have sustained by the sudden privation of that stimulus which was afforded to them during gestation, by the distension of the bloodvessels, and the stimulating nature of their contents, in the same way as I have explained delirium tremens†

to supervene in subjects accustomed to the stimulus of ardent spirits, &c. &c., on the sudden cessation of their habitual intemperance. Like delirium tremens, also, this disease does not come immediately on the occurrence of the cause, but takes a given time, according to the nature of the constitution, and the degree of previous stimulation, before it becomes developed, and extreme debility in both cases is generally observed to precede the stages of delirium; in short, puerperal mania seems to me to run a course, though generally much more protracted than that of delirium tremens, which would entitle both disorders to be arranged in the same class, order, and genus.

As regards the treatment, he says, our object should, of course, be to endeavor to induce such a state of the system as would resemble, in the greatest possible degree, that which existed previous to delivery. To effect this, the horizontal position should be carefully observed, in order to favor the ascent of the blood to the head. On the same principle, the abdomen should be properly supported by a roller, and all drains on the system, such as giving suck, &c., should be particularly avoided. The various secretions should at the same time be carefully regulated, and local determinations relieved on general principles; during all this the strength ought to be supported by a light but nutritious diet, together with a moderate administration of diffusible stimuli, joined to sedatives, antispasmodics, and tonics, as the peculiarities of each case might indicate. These, with good air and the usual attentions,

\* Vide Edinburgh Medical and Surgical Journal for Oct., 1823, or the London Medical and Physical Journal for Nov. of the same year.

† See a paper on the buffy coat of the blood, in the Medical and Physical Journal for November, 1829.

both moral and physical, which are found advantageous in the guidance of insane patients, are, apparently, the means most likely to prove efficacious in this oftentimes very distressing nervous delirium; and on reference to the works of Denman, Professor Burns, Drs. Gooch, Marshall,

Hall, Abercrombie, Ryan, and others, they will not be found to differ essentially in principle from the *methodus medendi* proposed by these authors, although they have not taken the same view of the causes of the disorder that I have ventured to.

BOSTON, TUESDAY, DECEMBER 28, 1830.

MR. HALSTED'S DISCOVERY.

EVERY body has heard of Mr. Halsted, of New York, and his celebrated discovery of a cure for dyspepsia. Within a few days, he has opened this discovery to the public, after having kept it a secret six or eight months, done a world of good, and taken a world of pay. In the introductory chapter of his book, he assigns his reasons for not divulging his remedy before, viz., the desire of perfecting his discovery, and remunerating himself for his ingenuity;—both these are very satisfactory, and such motives as no honorable man would be ashamed to confess. That it has at last been made public, we apprehend is to be attributed, in part at least, to necessity. If the precise method in which he stimulates the stomach was not generally known, the community were fast verging toward a pretty accurate knowledge of it, and would doubtless have had the whole secret ere long, even without his instrumentality in promulgating it. It was certainly a mark of wisdom in Mr. H., therefore, to publish his book just at the moment he did, whilst curiosity was still alive and unsatisfied; and we

verily believe he will reap from its sale a harvest scarcely less abundant than that he has gathered from the secret practice of his art.

The book of Mr. H. is designed for the general rather than the medical reader, since it is mostly made up of what have long been axioms in medicine, and simple descriptions of familiar organs and long-known functions. His account of the parts concerned in the digestive process, is taken from that excellent publication, the "Library of Useful Knowledge." The *symptoms* of Dyspepsia are enumerated as by one who has felt them, and its *causes* also are made the subject of a chapter. The fourth chapter is on the condition of the stomach in this disease, in which much account is made of its muscular debility or the defective action of its muscular fibres.

Mr. Halsted dwells with peculiar emphasis on the contracted state of the abdominal muscles in this disease,—a condition which was particularly distressing, it seems, in his own case, but which is far from being uniformly attendant on the complaint. He supposes that the undue compression exerted by these muscles

on the stomach and bowels, is the cause of the impeded respiration, frequent sighing, obstinate constipation, forward bend of the body, and some other ordinary symptoms of indigestion. Hence the first object of his treatment is to relax these muscles by fomentations, and the proper exercise of the will to this effect. There is doubtless much truth in his ideas on this subject. The common exercise of riding on horseback is often rendered useless to the dyspeptic, by the circumstance of his sitting on the saddle ill at ease; and fecal evacuations are effectually prevented by great exertions to forward them. By diverting the mind so as to avoid such efforts, the abdominal muscles become relaxed, and the intestines throw off their contents with comparative ease; and a rider who is at home upon his saddle, brings these muscles into a state entirely different from that strong contraction they assume in the bent figure of his timid companion. But this relaxed state of the muscles being induced, we have yet to learn that the process of kneading, or pushing, or rubbing, or whatever else Mr. H. pleases to call it, is any more beneficial, or even half as much so, as long-continued exercise on horseback or in a carriage. In order that every reader may judge for himself on this point, we have given, in today's paper, the whole of Mr. Halsted's chapter on his "Mode of Treatment." It appears to us subject to grave objections, especially if practised whilst the dyspeptic symptoms arise from undue irritation of the stomach,—a mistake very likely

to occur now that the book is in so many hands.

If we rightly comprehend Mr. H., he pretends only, by his process, to simulate exercise, and particularly horseback exercise. Allowing he does this to a charm, it can yet be done only occasionally in the day, whilst riding is a continued application of the remedy for hours and days in succession. Besides this, we have in travelling the diversion of the mind, the stimulus of new scenes and changing prospects, which contributes not a little to restore to the system, and every part of it, its healthy condition.

We will only add, that Mr. H. appears to us in error, when he supposes his mode of pressing or kneading the stomach and bowels, to move them in the direction of their natural peristaltic motion. This action is no more up than down, nor can it be traced or followed by any mode of external compression or concussion.—The volume ends by two chapters on diet and exercise, which contain the usual directions on these subjects,—directions which physicians always give, every body approves, and nobody follows.

It is gratifying to find that Mr. H. has, according to his statement, relieved so much suffering by his mode of practice; and it is a great pity, for the good of dyspeptics, that he could not have kept his secret longer: for, after all, there are few diseases so much under the influence of the mind as that in question, and we fear, now that the mystery, and the fee which magnified it, are out of the way, the discovery of Mr. H.

will be little more efficacious than the old-fashioned kneading or the shampooing of the East, and much less so than horseback exercise in good company and through a diversified and agreeable country.

#### OIL OF TURPENTINE IN MERCURIAL SALIVATION.

DR. GEDDINGS, of the Medical School of Charleston, S. C., recommends gargles of the terebinthine oil, in that distressing consequence of the use of mercury, which has baffled hitherto all the attempts of the Faculty to arrest it. In the hospital and private practice of Dr. G., many remedies had been tried in this affection without benefit. Sulphur had always disappointed his expectations. Emetics had afforded relief but seldom. Cold was not always a safe application. Opium did little else than relieve pain. Astringent gargles were rarely of use. Porter had sometimes succeeded; and the *Rhus Glabrum* had never been tried. About two years ago, he commenced the use of the gargle of turpentine; and in an extensive practice since that time, it has always afforded satisfactory results. His mixture is 2 drachms of the oil of turpentine to 8 ounces of the mucilage of gum arabic, to be used frequently every day. If smarting is at first produced, it is transient, and even a stronger mixture has been sometimes used with safety and success.—This is a valuable discovery. In a previous number we have spoken of the efficacy of blistering the neck in cases of salivation,

but the gargle of Dr. G. is certainly preferable, if it proves as curative in other hands as it has proved in his.

#### PREMATURE LABOR.

DR. CAMPBELL gives a case of premature labor, artificially excited, in the *Edinburgh Medical and Surgical Journal*. The fœtus was born alive, but afterwards perished from convulsions, in consequence of the injury received during birth. Dr. C. is a decided advocate for inducing premature labor in cases of moderate deformity of the superior strait; but contends that the child's safety is much endangered by puncturing the membranes and allowing the liquor amnii to escape. He says it is merely necessary, by means of the finger or a small catheter, to *separate the membranes from the uterus for a short distance*. Labor usually supervenes in from three to seven days. The patient should walk about, and occasionally take a cathartic. She should avoid straining, so that the membranes need not be ruptured, if possible, until the head is about to make its exit from the vagina. In this way the child suffers less from pressure.

*Chilblains*.—Professor Graefe, of Berlin, states that in the management of these affections, when the pain is considerable, he has found much advantage from the application of leeches. But when the pain is, from the first, moderate, or has been mitigated by the abstraction of blood, a solution of chloride of lime affords more relief than any other application. He employs it in the proportion of one part of the chloride to twenty-four parts of water, which is to be applied to the part by means of thin pledgets wet with the solution.—*Journ. fur Chir. und Aug.*

*Staphyloraphy*.—M. Roux performed this operation successfully

on a man, at the Hôpital de la Charité, May 4th, 1830. The division was congenital and limited to the soft parts. This is the forty-eighth case of divided palate in which M. Roux has performed the operation of staphyloraphy.

**Disinfecting Powers of Chloride of Lime.**—M. Poutet, of Marseilles, says, that this substance cannot be used with advantage in destroying the bad odor of fish or marine animals, for that it evolves one as bad as any they can previously possess. The powder added with a little water to fresh or salt fish, cut into small pieces, evolved such an odor of bromine as to be insupportable. The muscle of putrid fish produces a still worse smell, and the same thing took place with other marine products, as shell-fish, sponges, &c. —*Quarterly Journal of Science.*

**Impure Salt in France.**—An account has lately been given to the Academy of Medicine, of certain impurities in common salt. The salt used in Fere-Champenoise and the neighborhood having induced violent colic, accompanied with swelling of the face, in many of the inhabitants, M. Cosmenie has examined it, and found in it bromine, bromide of sodium, iodine, and iodide of potassium. Several of the members had been charged with the examination of the salt used in Paris. M. Baruel had met with some containing iodine. M. Chevalier had examined many specimens of salt that had been seized, but had not found iodine in any of them. Some of them had been adulterated by the admixture of sulphate of soda.—*Bul. Univ.*

**Dangerous Plant among Water-cresses.**—The procumbent water-

parsnip, *Sium nodiflorum*, is a dangerous plant of the umbelliferous class, which grows mixed with water-cresses in springs and streams. When not in flower, it so much resembles the latter, that it is with difficulty distinguished except by a botanist. Water-cresses are of a deeper green, and sometimes spotted with brown, and the extremities of the leaves are more round, and especially the last leaves, which are in pairs, larger than the others, and undulated at their edges. The water-parsnip, on the contrary, is of a uniform green; the ends of its leaves are longer and narrower, conical at the extremities, and toothed at the edges. The best method of knowing them well is to examine them in July, when their flowers are expanded, and when they may be thoroughly distinguished from each other.—*Quarterly Journ. of Science.*

**Extinguishment of Fires in Chimneys.**—A few pinches of flowers of sulphur thrown at short intervals upon the coals or wood burning in the fireplace, will speedily extinguish the most raging fire in a chimney. A wet cloth should be hung before the fireplace. This method has been effectually tried at the mint in Paris, and has received the sanction and recommendation of D'Arcet, Huzard, Labarraque, Pelletier, Berard, and other reporters.—*Ann. de Chim.*

**Cincinnati College.**—We perceive by the message of Governor Trimble to the Legislature of Ohio, that there are 150 students at the Medical College in Cincinnati.

In Dr. Robbins' communication of last week, second column, page 723, for "less than 15 drops," read less 15 drops.

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Whole number of deaths in Boston the week ending December 17th, 25. Males, 11,—Females, 11. Stillborn, 3.

Of convulsions, 1—croup, 2—lung fever, 3—consumption, 4—unknown, 2—liver complaint, 2—old age, 1—dropsy on the heart, 1—inflammation on the lungs, 1—mortification, 1—quinsy, 1—intemperance, 1—strangury, 1.



## ADVERTISEMENT.

WILLIAMS ON DISEASES  
OF THE LUNGS.

**T**HIS day received, by CARTER & HENDEE, "A Rational Exposition of the Physical Signs of the Diseases of the Lungs and Pleura, illustrating their Pathology and facilitating their Diagnosis." By CHARLES J. B. WILLIAMS.  
Dec. 6.

BECLARD'S GENERAL ANA-  
TOMY.

**C**ARTER, HENDEE & BABCOCK have this day received—Elements of General Anatomy, or a Description of every kind of Organ composing the Human Body. By P. A. BECLARD, Professor of Anatomy of the Faculty of Medicine of Paris. Preceded by a critical and biographical Memoir of the Life and Writings of the Author. By OLIVIER, M.D. Translated from the French, with Notes. By JOSEPH TOGNO, M.D., Member of the Philadelphia Medical Society. Dec. 28.

## VACCINE VIRUS.

**N**ATHAN JARVIS, on account of frequent solicitations, will constantly keep for sale FRESH VACCINE VIRUS, taken by a physician from healthy subjects. It will be furnished at a reasonable price on demand, either in scabs or quills. Physicians in the country who are in want of Virus, can send their orders by mail, as it can be enclosed in a letter and transmitted without any great expense of postage. June 1.

*Apothecaries' Hall,  
No. 188 Washington Street.*

**J**UST published, and for sale, by CARTER & HENDEE,—Malaria; an Essay on the Production and Propagation of this Poison. By JOHN McCULLOCH, M.D. F.R.S., &c. &c.

## NEURALGIC DISEASES.

**A** TREATISE on Neuralgic Diseases, dependent upon Irritation of the Spinal Marrow, and Ganglia of the Sympathetic Nerve. By THOMAS FRIDGIN

TEALE, Member of the Royal College of Surgeons in London, &c. Just received by CARTER & HENDEE. Nov. 2.

## GERMAN LEECHES.

**R**ICHARD A. NEWELL, Druggist, Summer Street, respectfully informs the Physicians and Public generally, that he has just received a fresh supply of the above-named *Leeches*, which will be sold at a fair price.

N. B.—Leeches sent to any part of the city, and applied, without extra charge, by day or by night. 6w—Nov. 8.

SURGICAL INSTRUMENTS  
AND CHEMICALS.

**S**TUDENTS in want of the above articles, would do well to call, before purchasing, at BREWER & BROTHERS', Nos. 90 and 92 Washington Street—Boston.

Oct. 15.

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ABERCROMBIE ON DISEASES  
OF THE STOMACH.

**J**UST received by CARTER & HENDEE—Pathological and Practical Researches on Diseases of the Stomach, the Intestinal Canal, the Liver, and other Viscera of the Abdomen. By JOHN ABERCROMBIE, M.D., Fellow of the Royal College of Physicians of Edinburgh, &c., and first Physician to his Majesty in Scotland. Sept. 28.

SURGEON DENTIST'S MA-  
NUAL.

**J**UST received, by CARTER & HENDEE, The Surgeon Dentist's Anatomical and Physiological Manual. By G. WAITE, Member of the Royal College of Surgeons. Nov. 2.

**T**HE AMERICAN JOURNAL OF MEDICAL SCIENCES, No. 13, for November, 1830,—Just received by CARTER & HENDEE.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.